

JENNIFER M. GRANHOLM GOVERNOR

JOHN D. CHERRY, JR.

Dear Potential Candidate:

Thank you for your interest in a judicial appointment. Please find included a Judicial Appointments Questionnaire for your completion. With the Governor's Legal Counsel, we have outlined a process to follow as the Governor works toward filling this vacancy.

Some candidates for appointment will be selected for interviews pursuant to guidelines set by the Michigan Constitution and the State Bar's Judicial Qualifications Committee. Please note that an applicant must live in the vacant judicial district (defined in PA 236 of 1961) to be appointed. Also, the State Bar's Judicial Qualifications Committee will be conducting reference checks which include contacting judges and opposing counsel from an applicant's last five cases. The Qualifications Committee would like to advise candidates to be prepared for questions related to personal financial issues, disciplinary actions, potential conflicts of interest or any other issues that the Committee believes to be relevant to qualifications to sit as a judge.

Please return two copies of this questionnaire to the Appointments Division within the deadline displayed in the News & Events section of the State Bar's website (www.michbar.org). Please mail the information to the Office of the Governor, Attention Appointments Division, P.O. Box 30013, Lansing, MI 48909, or fax to (517)335-7899. If you are sending the questionnaire by mail, please do not staple any of the materials.

Any application submitted to our office that is incomplete or handwritten will not be accepted and will be returned to the applicant for completion. The Governor's Office must be in receipt of a complete application prior to the submission deadline.

If you have any questions, please contact Erik Wilford at (517) 373-6228.

Sincerely,

Susan R. Corbin, Director

Susan R. Corbin

Appointments Division
Office of the Governor



JENNIFER M. GRANHOLM GOVERNOR JOHN D. CHERRY, JR. LT. GOVERNOR

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JUDICIAL APPOINTMENT QUESTIONNAIRE

We request cooperation and frank disclosure in answering this questionnaire. If the space provided for answering the questions is not adequate, please use a Supplemental Answer Sheet and state "See Supplemental Answer Sheet" if there is space provided. If a question does not apply, write "Not Applicable" or "None" as the response.

·E
ONE NUMBER
ADDRESS
DDRESS

PART II — RESI	IDENCE HISTOR	RY					
Begin with you		ce. Include all ad				mission to practice law in Mich er temporary purposes and the	
MO/Y	YR TO MO/YR				CITY,	STATE, ZIP CODE	
PART III — EDU	JCATIONAL BAC	CKGROUND					
15. High Schools	MO/YR TO MO		SCHOOL	NAME		CITY & STATE	
16. Colleges _	MO/YR TO MO		SCHOOL	NAME		CITY & STATE	DEGREE
_			301100E				
17. Law Schools ₋	MO/YR TO MO	/YR	SCHOOL	NAME		CITY & STATE	DEGREE
17. Law Schools _	MO/YR TO MO	/YR	SCHOOL	NAME		CITY & STATE	DEGREE
- 18. Other Educational	MO/YR TO MO	- /YR	SCHOOL	NAME		CITY & STATE	DEGREE
Institutions	MO/YR TO MO		SCHOOL	NAME		CITY & STATE	DEGREE
denied course law school or explain the cir PART IV — LAW 20. Indicate in re- most recent si	e credit, suspende other educational rcumstances, usin ### AND EMPLOYN verse chronologicatatus) since admissioner educational rcumstances.	d, expelled or req institution? If so, g a supplemental MENT BACKGRO al order all part-ti ssion to practice la	answer sheet. UND me and full-time eaw in Michigan. If	te your enrolli and address mployment a you list more	ment, by any co of each instituti s well as periods than three posit		olemental
MO/YR TO MO/Y	YR	EMPLOYER, CO	MPANY, FIRM		JOB TITI	LE OR POSITION	
		STREET ADDRE	ESS		CITY, ST	TATE, ZIP CODE	
Provide the teleph	hone number for y	your current posit	ion:	() AREA CODE	NUMBER		
MO/YR TO MO/Y	 YR	EMPLOYER, CO	MPANY, FIRM		JOB TITI	LE OR POSITION	
		STREET ADDRE	ESS		CITY, ST	TATE, ZIP CODE	
MO/YR TO MO/Y	YR	EMPLOYER, CO	MPANY, FIRM		JOB TITI	LE OR POSITION	
		STREET ADDRE			CITY, ST	ATE, ZIP CODE	

NAME: _____ S.S #: _____

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NAME:	S.S #:				CON	FIDENTIA
reasons? If so, ex (Use Supplementa 22. State the nature)	en discharged, or asked to resign, or resign plain the underlying circumstances and ider al Answer Sheet.) of your law practice including professional s f Michigan. If the nature of your practice ha	ntify the involved employer or entitive the involved employer or entitive entities or areas of particular columns.	mpetence,			
	racter of such practice and the periods invol		iy ume iii i	пе разг, ргоч		Jetalis,
23. If you are appoin firm, employer an	ted to the court, how do you propose to wii d/or company?	nd up your law practice or sever yo	our relation	iships with yo	ur prese	nt clients,
including whether	en a candidate for election to any public of successful or unsuccessful:				Yes	 No
DATES	PUBLIC OFFICE	CITY, STATE, ZIP	Succe	ssful Unsuccesful	# 0	f Candidates
	PUBLIC OFFICE ught appointment to judicial office? If so, p t the time if it is different from your answer			interviewed	# o	Candidates No
 DATES	COURT	Interview?	Yes			
DATES	COURT	Interview?	Yes	 No		
26. List trial experience which	ce and appellate work, if any, and identify t you believe is equivalent to trial experience	the particular courts. If you have h	ad no trial	experience, ir	idicate t	he
27. State your experi	ence in adversary proceedings before admir	nistrative boards or commissions d	uring the la	ast five years.		

ASE NAME & YEAR	COUR	Т		NAMES OF PRESIDING JUDGE & O	PPOSINO	G COUNSE
						
ART V — MILITARY BA	ACKGROUND					
Are you now or have y guard? If so, provide the			military service, any reserve	e component, or any national	Yes	No
IO/YR TO MO/YR	BRANCH	OF SERVICE	ACTIVE OR RESERVE	ARMED SERVICES IDEN	NTIFICAT	TON NOS
				ding under Art 15 of the Uniform	 Yes	
military tribunal.	e? If so, state t	the date, underlyir	ng circumstances, nature of	the charge and identify the	res	
military tribunal. 1. Have you ever been d	ischarged othe	er than honorably		ve you ever been medically or	Yes	
military tribunal. 1. Have you ever been di administratively discha	ischarged othe irged? If so, ex ejected for mili	er than honorably to the control of	from military service, or hav	ve you ever been medically or		
military tribunal. 1. Have you ever been di administratively discha 2. Have you ever been re and the underlying circ	ischarged othe orged? If so, ex ejected for milli cumstances.	er than honorably to the control of	from military service, or hav	ve you ever been medically or derlying circumstances.	Yes	No
military tribunal. 1. Have you ever been di administratively discha 2. Have you ever been re and the underlying circ ART VI — ATTORNEY I 3. Have you ever applied	ischarged other orged? If so, exemple of so, exemple of some o	er than honorably to explain the nature of tary service? If so w or to take a bar where and state t	from military service, or have of the discharge and the uncomplete of the discharge and the uncomplete of the discharge and the disposition of the application	ve you ever been medically or derlying circumstances.	Yes	No
military tribunal. 1. Have you ever been di administratively discha 2. Have you ever been re and the underlying circ ART VI — ATTORNEY I 3. Have you ever applied another state? If so, st	ischarged other orged? If so, exemple of so, exemple of some o	er than honorably splain the nature of tary service? If so wor to take a bar where and state total admission requires	from military service, or have of the discharge and the uncomplete of the discharge and the uncomplete of the discharge and the disposition of the application	ve you ever been medically or derlying circumstances. and provide the branch of service	Yes	No No
military tribunal. 1. Have you ever been di administratively discha 2. Have you ever been re and the underlying circ ART VI — ATTORNEY II 3. Have you ever applied another state? If so, st for administrative bodi	ischarged othe irged? If so, ex ejected for mili cumstances. LICENSURE I to practice lav tate when and es having spec	er than honorably explain the nature of tary service? If so w or to take a bar where and state to ial admission requirements.	from military service, or have of the discharge and the uncomplete of the discharge and the uncomplete of the discharge and the disposition of the application	ve you ever been medically or derlying circumstances. and provide the branch of service tate or federal jurisdiction or in ation. Provide the same information	Yes	No No
military tribunal. 1. Have you ever been di administratively discha 2. Have you ever been re and the underlying circ ART VI — ATTORNEY II 3. Have you ever applied another state? If so, st for administrative bodi FILING DATE FILING DATE 4. Have you ever been and another state?	ischarged other ischarged? If so, experienced? If so, experienced for military ischarges. LICENSURE I to practice law tate when and es having specific during specific during the company of the company	er than honorably explain the nature of tary service? If so we or to take a bar where and state to claim admission requestrion.	from military service, or have of the discharge and the uncomplete of the discharge and the uncomplete of the discharge and the disposition of the application	ve you ever been medically or derlying circumstances. and provide the branch of service tate or federal jurisdiction or in ation. Provide the same information DISPOSITION DISPOSITION	Yes	No No
military tribunal. 1. Have you ever been di administratively discha 2. Have you ever been re and the underlying circ ART VI — ATTORNEY II 3. Have you ever applied another state? If so, st for administrative bodi FILING DATE FILING DATE 4. Have you ever been and another state?	ischarged other inged? If so, experienced? If so, experienced for military is a serience of the serience of th	er than honorably explain the nature of tary service? If so we or to take a bar where and state to claim admission requestrion.	from military service, or have from military service, or have of the discharge and the unconstant of the discharge and the unconstant of the disposition of the application of the application.	ve you ever been medically or derlying circumstances. and provide the branch of service tate or federal jurisdiction or in ation. Provide the same information DISPOSITION DISPOSITION	Yes	No No
military tribunal. 1. Have you ever been di administratively discha 2. Have you ever been re and the underlying circ PART VI — ATTORNEY II 3. Have you ever applied another state? If so, st for administrative bodi FILING DATE 4. Have you ever been acour admission date and in	ischarged other inged? If so, experienced? If so, experienced for military is a serience of the serience of th	er than honorably explain the nature of tary service? If so we or to take a bar where and state to call admission requirements. TION TION Ctice law in any feels distingtion.	from military service, or have from military service, or have of the discharge and the unconstant of the discharge and the unconstant of the disposition of the application of the application.	ve you ever been medically or derlying circumstances. and provide the branch of service tate or federal jurisdiction or in ation. Provide the same information DISPOSITION DISPOSITION	Yes	No No

NAME: _____ S.S #: _____

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NAME:	S.S #:		CONF	IDENTI
PART VII — OTHER LICENSUR	E			
character and fitness? If so, pr	neld a license, other than as an attorney rovide the type of license, the date of a of the application, and the current stat		Yes	
PART VIII — LICENSING DISC	IPLINE			
any professional organization,	or as the holder of any office or license ne disposition and provide the name and	om practicing law, or from membership in ? If so, explain the underlying circumstances, d address of the authority possessing the	Yes	No
attorney, or as a member of a explain the underlying circums	ded, admonished, censured or otherwise ny professional organization, or as the h tances, including relevant dates and the ssing the record. (Use a Supplemental)	nolder of any office or license? If so, e disposition and provide the name and	Yes	No
as a member of any profession pending any complaint against	nal organization, or as the holder of any you which could result in such charges	er been made against you as an attorney, or office or license, or is there presently being made? If so, explain the underlying de the name and address of the authority	Yes	No
	any request for investigation or other or must obtain and enclose a copy of the e	omplaint filed with the Judicial Tenure entire Judicial Tenure Commission file with	Yes	No
		rporation, partnership, limited partnership, ss entity? If so, provide the following	Yes	No
BUSINESS NAME AND FULL ADDR	FORM OF BUSINESS	JURISDICTION WHERE ARTICLES OR O BUSINESS CREATION DOCUMENTS ARE		
	partner, operating member, officer or only other business entity? If so, indicate	director of any partnership, limited liability for each position:	Yes	No No
BUSINESS NAME AND FULL ADDR	ESS POSITION HELD	MO/YR TO MO/YR		
13. For each husiness identified in	vour answers to Operations 40 and 41	above during the periods indicated. Has		
the business been a defendant		above, during the periods indicated: Has ration or administrative proceedings, or has tribe the underlying circumstances.	Yes	No

NAME:		S.S #:		CONFI	IDENTIA
PART X— FINANCIAL DATA					
44. Da vari hava anvi dahta vih	: ala aua uaaua al aa	un 00 davia maak diva2 lif aa muu iida	ware and addresses of the		
		in 90 days past due? If so, provide son for the arrearage and the statu		Yes	No
45. Have you in any fiduciary o	anacity had a ch	neck returned for insufficient funds	2 If so provide the name and		
		e account number and describe the		Yes	No
46. Have you ever failed to tim	ely pay any fede	eral or state income taxes in such a	a manner that you were assessed		
penalty interest by a taxing	authority?		•	Yes	No
			a lien against you for delinquent taxes?		
If yes, describe the circums	tances and ultim	nate disposition of the matter or m	atters.	Yes	No
		of any taxes, other than those de			
		taxes, and employee withholding to and ultimate disposition of the ma	axes for wages or other employee atter or matters.	Yes	No
49 Have you ever made an an	nlication for or c	obtained employment that required	honding? If so provide the		
following information:	phodulon for or o	solumou employment that required	bonding. If so, provide the	Yes	No
EMPLOYER'S NAME AND FULL	ADDRESS	NATURE OF WORK	MO/YR APPLIED OR MO/YR TO	MO/YR E	EMPLOYED
		 provide the date of the application g coverage and the reasons for refuse 		Yes	No
bonding, the name of the c	ompany rerusing	g coverage and the reasons for ren	asai.	103	110
51. Has anyone ever sought to	cancel or collec	t upon a bond issued for you? If so	identify the situation involved		
and explain the underlying			o, identify the situation involved	Yes	No
52. Have you ever been deling	uent in the paym	nent of any child support obligation	n? If yes, provide the case caption, docket		
	t of obligation, d	late established, current status of a	accounts, and date of each arrearage, and	Yes	No
PART XI — CIVIL LITIGATI	ON				
53. Have you ever been a part	y to any civil litig	gation, including administrative pro	oceedings or arbitration? If so, provide		
the particulars.	J	·	•	Yes	No
54. Have you ever been cited of	or held in contem	npt of court? If so, explain.			
				Yes	No

55. Have judicial enforcement proceedings ever been instituted against you alleging your nonperformance of any judgment, order, decision or award against you? If so, provide the particulars.

Yes

NAME:	S.S #:	CONFIDENTIAL

PART XII— CRIMINAL HISTORY

If so, please provide details.

With regard to the disclosure of criminal matters discussed in the section, you must further disclose for each affirmative answer the date of arrest, underlying factual circumstances, name and address of arresting agency, nature of charges, name and address of the court and sentencing information, including the terms of probation and probation officer's identity if applicable.

56.	Have you ever been arrested, charged, or held by federal, state or other law enforcement authorities for violation of any federal law, state law, county or municipal law, regulation or ordinance? If so, please provide details. Do not include traffic violations for which a fine of \$100 or less was imposed or which involved less than four points.	Yes	No
57.	Have you ever agreed to testify or provide information or assistance to prosecuting officials in order to obtain immunity from criminal prosecution? If so, set forth the details and the name and address of the involved	Yes	
	prosecuting officials.		
58.	Have you ever been asked to testify in a grand jury proceeding in which you were informed that you were a subject? If so, set forth the details.	Yes	No
PA	RT XIII- POTENTIAL CONFLICTS OF INTEREST		
59.	To your knowledge, does any organization to which you belong or have belonged exclude persons on the		
	basis of race, color, religion, sex, national origin, disability, marital status, sexual preference, height, weight, arrests or veteran status? If so, please describe.	Yes	No
60.	Have you ever been publicly identified, in person or by organizational membership, with a particularly	Vac	
	controversial national or local issue? If yes, please describe.	Yes	No
61.	Do you know of any person or group who might take overt or covert steps to attack, even unfairly, your appointment? If so, please identify and explain the basis for the potential attack.	Yes	No
62.	Are you, your spouse or partner, any member of your household or other close family members related to any state government official or employee? If so, please provide details.	Yes	No
63.	During the past five years have you, your spouse or partner, any member of your household or other close		
	family members, or any legal entity to which any of the aforementioned parties are a beneficiary of, received any compensation or been involved in any financial transaction with the State of Michigan? If so, please explain.	Yes	No
64.	During the past five years, have you, your spouse or partner, any member of your household or other close family		 No
	members received any compensation or been involved in any financial transaction with any state government official? If so, please explain.	Yes	NO
65.	Is the nature of employment for your spouse or partner, any member of your household or other close family members related in any way to the position to which you want to be appointed? If so, please indicate the employer, the position and the length of time it has been hold.	Yes	No
	and the length of time it has been held.		
66.	Describe briefly any lobbying activity during the past ten years in which you have engaged for the purpose of influencing defeat or modification of any legislative or administrative action. Describe briefly any lobbying activity during the last ter your spouse or partner has engaged for the purpose of influencing the passage, defeat or modification of any legislative action that is related in any way to the position to which you have been appointed. ("Lobbying activity" includes any acti as an individual or agent of another individual or of any organization that involves direct communication with an official in branch of state government, or an official in the legislative branch of government.) If none, please state.	n years or adm vity per	in which inistrative formed
67.	Describe any interest which you, your spouse or partner, any member of your household or other close family members (whether as an officer, owner, director, trustee or partner) in any corporation, firm, partnership, or other business enternon-profit organization or other institution that is regulated by or receives direct financial benefits from any department State of Michigan. If none, please state	prise ar	nd any

68. Have you ever been sanctioned by any government body, with or without penalty, for activities deemed unethical, illegal, immoral, etc.

NAME: _		S.S #:		CONFI	DENTIA
PART X	(IV— OTHER PROFESS	SIONAL ACTIVITY			
	e you ever had any of your itles and citations.	our writings published in professional journals or any o	ther publications? If so,	Yes	No
70. In a	ddition to the writing sar	mples required in Question 27, please provide copies o	f three articles or publications.		
71. Hav	e you ever taught a law	course? If so, provide the type of course, institution ar	nd dates.	Yes	No
which y	ou may have held in suc	professional societies which you are or have been a month of groups. List also chairmanships of any committees in tees which you believe to be of particular significance.	bar association and professional se		offices
	other organizational mer whether you served as	mberships since graduation from law school. Include ci an officer.	vic and charitable organizations da	tes of servio	ce, and
74. Hav	e you ever been treated	for abuse (ie. drug, alcohol, gambling). If so, when?			
		qualifications for judicial office. What do you feel in you e selected for judicial office.	ur past experience, in or out of the	law, has be	en
76. List	three judges who know tions, addresses and offi	you and your work who can be interviewed relative to	your qualifications as a judge. List	full names,	
розі 1.	tions, addresses and one	ce priorie numbers.	()		
	FULL NAME	OCCUPATION	OFFICE PHONE N	NUMBER	
	STREET ADDRESS, CI	TY, STATE & ZIP			
2			()		
	FULL NAME	OCCUPATION	OFFICE PHONE N	NUMBER	
	STREET ADDRESS, CI	TY, STATE & ZIP			
3			()		
	FULL NAME	OCCUPATION	OFFICE PHONE N	NUMBER	
	STREET ADDRESS, CI	TY, STATE & ZIP			

78. I have attached _____ Supplemental Answer Sheets which are dated and signed and which are incorporated into

this Questionnaire by reference. I have also attached _____ Exhibits (writing samples) bearing my initials.

NAME: _____ S.S #: ____

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NAME:	S.S #:	CONFIDENTIAL

AGREEMENT

I have carefully read the Michigan Rules of Professional Conduct and Michigan Code of Judicial Conduct promulgated by the Supreme Court of Michigan, and I understand that if I serve as judge in Michigan I will be bound thereby. I understand that completion and filing of this questionnaire and supplemental information, and appearance for requested interviews with members of the Governor's Staff are prerequisites to an evaluation of my judicial potential. I agree to furnish additional information under oath, orally or in writing as may be required, to the Office of the Governor throughout any period of time during which my candidacy is pending.

I understand that members of the public and persons and entities acting in any capacity are encouraged to submit information about me for the evaluation, and that, in addition to the information and documents submitted in this application, my application materials for admission to practice law in Michigan will be reviewed. I request and authorize any person or institution with any records or knowledge of my person and character, including information that might otherwise be considered privileged or confidential, to furnish such information as may be requested by the Office of the Governor or its agents. I understand this authorization will terminate with the rendering of an evaluation to the governor or upon my written withdrawal of this authorization, which withdrawal shall result in the immediate discontinuance of the processing of this questionnaire.

I release and discharge from all liabilities whatsoever the Governor and her staff, the members of the Standing Committee on Judicial Qualifications, staff members of the State Bar of Michigan and the Attorney Grievance Commission, individually and in their representative capacities, and any person or institution that furnishes information to them for my evaluation as a judicial candidate.

I understand that the information in this questionnaire, or any other information in the possession of the Office of the Governor, will be held in confidence, subject to release to the Governor. The answers are to be considered true from the date of the questionnaire until the date of my appointment to judicial office and if any answer or portion of an answer ceases to be true, I acknowledge that I have a continuing obligation to inform and I will immediately inform the Office of the Governor.

ATTENTION Questionnaire MUST Be Executed Properly Before A Notary.

		SIGNATURE OF CANDIDATE
Signed and sworn by		Name of Notary:
Before me on theday of, 2	20	Notary Public, State of Michigan, County of
		My Commission Expires
		Acting in the County of

TO BE COMPLETED BY CANDIDATE, MARKED "CONFIDENTIAL," AND RETURNED TO:

Office of Governor Jennifer Granholm, Appointments Division George W. Romney Building, 111 South Capitol Avenue P.O. Box 30013, Lansing, MI 48909